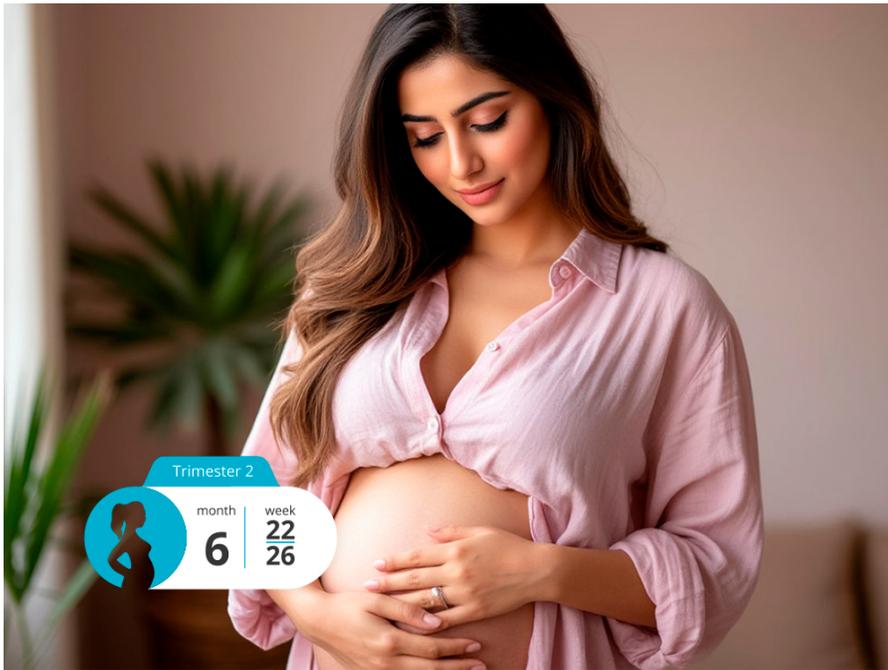


Sixth Month of Pregnancy: Preparing for the Final Stretch



Highlights

Sixth month marks the midpoint of the second half of pregnancy.

Uterus grows above the navel, causing frequent urination.

Fetal growth: length 19-23 cm, weight 350-850 g.

Development includes brain maturation, controlled movements, and beginning fat accumulation.

Common maternal experiences: weight gain, back discomfort, mild swelling, Braxton Hicks contractions.

Screening for gestational diabetes, androgen imbalances, and varicose veins may be performed.

Ultrasound and prenatal monitoring ensure fetal well-being and detect potential complications.

Prenatal support garments and proper nutrition improve comfort and reduce strain.

In This Article

Maternal physical and emotional changes

Weeks included \ (22-26 weeks\)

Fetal growth and developmental milestones

Nutrition and dietary guidance
Maternal weight gain and abdominal changes
Sexual activity and precautions
Potential issues and complications
Recommended tests and medical monitoring
Tools and assistance for expectant parents

Overview

With just about a month left before maternity leave, some expectant parents continue working while remaining mindful of their well-being. Emotional support for partners can also be important, especially for first-time fathers. Spending quality time together-walking, attending events, traveling-helps strengthen family bonds before the baby arrives.

Maternal Changes

Uterus growth: Uterus extends above the navel, with fundal height around 24-28 cm. The enlarged uterus presses on the bladder, causing frequent urination.

Avoid bladder overfilling to prevent urinary tract infections.

Warning signs: Seek medical attention for acute lower abdominal pain, uterine contractions more than 4 times per hour, heavy or unusual vaginal discharge, bleeding, severe edema, persistent nausea, vomiting, or headaches.

Blood and cholesterol: Slightly elevated cholesterol is normal, supporting placental hormone production.

Appearance and mood: Enhanced blood circulation gives a healthy complexion and energy; many mothers feel confident and attractive.

Weeks Included

Week 22 -> Week 26

Nutrition

Weekly weight gain ~500 g; total gain by end of month: 5-8 kg.

Avoid restrictive diets; insufficient nutrition may harm the fetus. Excessive weight gain should be addressed with a healthcare provider.

Choose high-quality, familiar, and gently prepared foods. Avoid fast food,

overly spicy, salty, fried, or smoked items.

Fetal Development

By the sixth month, the fetus measures 19-23 cm and weighs 350-850 g.

Fat layer begins forming, aiding postnatal temperature regulation.

Hands become more coordinated, and one hand may become dominant.

Nerve endings are highly active, and the brain's neuron count peaks.

Heartbeat: 120-160 bpm, detectable via stethoscope.

Sleep-wake cycles emerge; the fetus may dream and move noticeably.

Genitalia continue development: testes descend in boys, vagina forms in girls.

Lungs are immature; the placenta ensures oxygen supply. Preterm birth at this stage is risky but modern neonatal care allows survival for infants above 500 g (~85% survival rate).

Braxton Hicks contractions: practice contractions occur up to 10 times a day, generally harmless.

Maternal Weight and Abdominal Changes

Abdominal bump is visibly pronounced.

Size depends on body type, fetal placement, and parity.

Prenatal support belts reduce strain on the back, relieve pressure on internal organs, and can sometimes transition to postnatal use.

Sexual Activity

Libido may vary based on baseline sexual activity and hormonal effects.

Sex is generally safe if no complications exist.

Avoid intercourse if uterine tone is high or if complications are present (e.g., vaginal bleeding, placenta previa, genital infections).

Recommended positions: side-lying or woman on top to minimize abdominal pressure; avoid deep penetration and abrupt movements.

Potential Issues

Edema: May result from excessive weight gain rather than fluid retention.

Androgen imbalance: May require additional monitoring to prevent complications.

Gestational diabetes: Monitor for excessive hunger, thirst, frequent urination,

dizziness, or vision changes; confirm diagnosis via blood and urine tests.
Varicose veins: May appear or worsen; consult a phlebologist. Compression stockings, avoiding prolonged sitting, and frequent movement are recommended.

Ultrasound and Tests

Routine ultrasounds and check-ups monitor fetal growth, placental condition, amniotic fluid, and organ development.

Doppler studies assess blood flow and fetal oxygenation.

Lab tests may include glucose screening, hormone levels, and urinalysis.

Recommendations

Skin care: Mild itching may occur; moisturize or use antihistamines if recommended.

Bathing: Showers are generally safer; avoid slippery surfaces and excessively hot water.

Work adjustments: Consider lighter duties, shorter hours, or early maternity leave if work is physically demanding.

Prenatal support garments: Support belts help reduce strain on back and abdominal muscles.

Tools and Assistance

Pregnancy trackers for weeks, fetal growth, and maternal health.

Prenatal vitamins for calcium, iron, and other nutrients.

Maternity support products: belly bands, cushions for sleep, and supportive footwear.

Healthcare professionals: obstetricians, midwives, phlebologists, endocrinologists as needed.

Support networks: online communities and prenatal classes for sharing experiences and advice.

Summary:The sixth month of pregnancy brings significant physical and emotional changes. With proper nutrition, prenatal support, and careful monitoring, expectant parents can navigate this stage safely while preparing for the upcoming maternity leave and the baby's arrival.